

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00CORPORATION
ANNUAL REPORT
1995FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSAPPROVED
AND
FILED

95 APR 28 PM 1:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**DOCUMENT # P40304 (8)**

1. Corporation Name

AEROVIAS DE MEXICO, S.A. DE C.V.

Principal Place of Business

**13405 NORTHWEST FREEWAY, SUITE 140
HOUSTON TX 77040**

Mailing Address

**13405 NORTHWEST FREEWAY, SUITE 140
HOUSTON TX 77040**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/02/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0071171

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution☐**\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes☐ Yes☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

22

City & State

27

Zip

24

Country

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**STINSON, LIONEL A.
999 PONCE DE LEON BLVD
SUITE 100
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **CEO**
NAME **GERARDO DE PREVOISIN**
STREET ADDRESS **PASEO DE LA REFORMA 445**
CITY - ST - ZIP **COL CUAUHTEMOC 06500 MEXICO DF**TITLE **VCD**
NAME **ARIZA, ANTONIO**
STREET ADDRESS **PASEO DE LA REFORMA 445**
CITY - ST - ZIP **COL CUAUHTEMOC 06500 MEXICO DF**TITLE **DC**
NAME **CASTILLA, IGNACIO**
STREET ADDRESS **PASEO DE LA REFORMA 445**
CITY - ST - ZIP **COL CUAUHTEMOC 06500 MEXICO DF**TITLE **DSVP**
NAME **JOSE RAFAEL ROBLES DIAZ**
STREET ADDRESS **13405 NORTHWEST FREEWAY, SUITE 140**
CITY - ST - ZIP **HOUSTON TX 77040**TITLE **EVP**
NAME **CONTRERAS, FRANCISCO**
STREET ADDRESS **PASEO DE LA REFORMA 445**
CITY - ST - ZIP **COL CUAUHTEMOC 06500 MEXICO DF**TITLE **SVP**
NAME **DENNIS MANCINI,**
STREET ADDRESS **13405 N.W. FRWY., STE. 202**
CITY - ST - ZIP **HOUSTON TX 77040**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **CEO** ☒ Change ☐ Addition
1.2 NAME **ERNESTO MARTENS**
1.3 STREET ADDRESS **PASEO DE LA REFORMA**
1.4 CITY - ST - ZIP **COL CUAUHTEMOC 06500 MEXICO DF**2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the regular or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-95

Date

(713) 744-8478

Signature Number